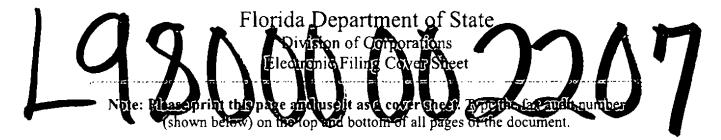
Division of Corporations



(((H21000139849 3)))



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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : GOZA AND HALL, P.A.

Account Number : I20000000006 Phone : (727)799-2625

Fax Number : (727)796-8908

LLC DISSOLUTION OR WITHDRAWAL CARLEN REALTY, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

APR - 9 2021

M. SOLOMON

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Help

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COVER LETTER

TO: Registration Section Division of Corporations		
CARLEN REALTY, LLC SUBJECT:		
(Name of Limited	Liability Company)
The enclosed Articles of Dissolution and fee(s) are submitted Please return all correspondence concerning this matter to the	-	
DONALD R. HALL, ESQ.		
(Name o	of Person)	
GOZA AND HALL, P.A.		
(Firm/C	Company)	
28050 U.S. HWY. 19 N., SUITE 402		,
(Ad	dress)	
CLEARWATER, FL 33761		
(City/State a	and Zip Code)	
For further information concerning this matter, please call:		
DONALD R. HALL	727 at (799-2625
(Name of Person)	(Area Code	& Daytime Telephone Number)
Enclosed is a check for the following amount:		
■ \$25.00 Filing Fee and Certificate of Dissolution		ee, Certificate of Dissolution & y (additional copy is enclosed)
Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Street Address: Registration So Division of Co The Centre of 2415 N. Monro Tallahassee, F	orporations Tallahassee oe Street, Suite 810

ARTICLES OF DISSOLUTION FOR A LIMITED LIABILITY COMPANY

		,
. The Articles of Organization were	filed on October 9, 1998	and assigned
document number L98000002207		
(effective date car Note: If the date inserted in this bloc	olution if not effective on the date of fil and be prior to or more than 90 days later than d ik does not meet the applicable statutory fili e on the Department of State's records.	ate document is received for filing)
A description of occurrence that re 605.0707, Florida Statutes, (copy 6	sulted in the limited liability company's 05.0707 on back cover letter).	dissolution pursuant to section
Consent of the Me	mbers.	
<u></u>		
		.*!
	name and address of the person appointe	ed to wind up the company's
If there are no members, enter the ractivities and affairs:	name and address of the person appointe	ed to wind up the company's
	name and address of the person appointe	
activities and affairs:		
activities and affairs:		

F1LING FEE: \$25.00

Notice of Limited Liability Company Dissolution

NOTE: This page is optional

This notice is submitted by the dissolved limited liability company named below for resolution of payment of unknown claims against this limited liability company as provided in s. 605.0712, F.S.

This "Notice of Limited Liability Company Dissolution" is optional and is not required when filing a voluntary dissolution.

Name of Limited Liability Company:	
Document number of Limited Liability Company is:	_
Date of dissolution was: February 1, 2021	
Description of information that must be included in a written claim:	
All claims against the assets of the limited liability company must be made in writing and include the claim	. • •.
amount, basis and origination date.	- :::
	0
	153
	_ 5 2:
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations)	<u> </u>
Mailing address where claims can be sent: (Claims cannot be sent to the Division of Corporations) ELLIS & CO., LTD.	<u> </u>
	<u> </u>
ELLIS & CO., LTD.	<u> </u>
ELLIS & CO., LTD. P.O. Box 1879	<u> </u>
ELLIS & CO., LTD. P.O. Box 1879	the
ELLIS & CO., LTD. P.O. Box 1879 Tarpon Springs, FL 34688-1879 A claim against the above named limited liability company will be barred unless a proceeding to enforce	the

Fee: No charge if included with Articles of Dissolution. If filed separately \$25.00